

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

NEW ORG. OF GROWTH OPPORTUNITIES

Name (print) R.O. Box 13001 Office (if applicable) RENO NV 89507 District (if applicable) 322 - 8247
 Mailing Address (include city and zip code) _____ Telephone No. _____
 E-Mail Address _____

Select Appropriate Box(es) ☐ CANDIDATE ☒ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ **Annual Filing - Due January 15, 2004**
 Period: January 1, 2003 - December 31, 2003

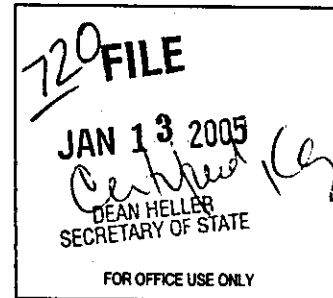
☐ **Report #1 - Due August 31, 2004**
 Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug 26, 2004
 Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug 26, 2004
 All others Period: Jan. 1, 2004 - Aug. 26, 2004
 Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug 26, 2004

☐ **Report #2 Due - October 26, 2004**
 Period: Aug. 27, 2004 - Oct. 21, 2004

☒ **Report #3 Due - January 15, 2005***
 Period: Oct. 22, 2004 - Dec. 31, 2004
 BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ **Annual Filing - Due January 15, 2005**
 Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2



CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100	2688 ⁴⁶	3904 ⁸⁶
2. Total Monetary Contributions Received of \$100 or Less	75 ⁻	100 ⁻
3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)		2753 ⁴⁶ 3504 ⁸⁶
4. Total Value of In Kind Contributions Received in Excess of \$100	0 0	

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100	2593 ²⁶	3309 ⁶⁰
6. Total Monetary Expenses Paid of \$100 or Less	95 ²⁶	95 ²⁶
7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)	2688 ⁴⁶	3404 ⁸⁶
8. Total Value of In Kind Expenses in Excess of \$100	0 0	

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Wm. S. Hammer, Res. Agent
 Signature

1/13/05
 Date

CAMPAIGN EXPENSES

Report Period **#5**Name (print) NEV. ORG. OF GROWTH OPPONENT

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

CAMPAIGN EXPENSES

Report Period

5

Nev. Org. of Growth Opponents

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Reno Gazette Jnl. Reno NV	D	10/22-27/04	2418 ¹⁰
Elko Daily Free Press Elko NV	D	10/26/04	175 ¹⁰

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